## PART B - FEE(S) TRANSMITTAL

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indicated unless correcte maintenance fee notifical	ed below or directed of tions.	herwise in Block 1, by (	(a) specifying a new com	respondence address	; and/or (b) indicating a ser	parate "FEE ADDRESS" for
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5073	7590 04/17	//2009	ha	ve its own certificate	e of mailing or transmission.	-
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DALLAS, TX 7:	5201-2980					(Depositor's name)
				77.11		(Signature)
						(Date)
APPLICATION NO.	FILING DATE	<u> </u>	FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/771,272	02/03/2004		Jimmy B. Eubank		073813.0110	2328
TITLE OF INVENTION SYSTEM	N: ORAL APPLIANCE	FOR MAINTAINING	STABILITY OF ONE	OR MORE ASPEC	'TS OF A USER'S MASTI	CATORY
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSU	E FEE TOTAL FEE(S) DUE	E DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	07/17/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS	J		
BROWN, MICHAEL A 3772		3772	128-848000			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> <li>ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below, no assigner recordation as set forth in 37 CFR 3.11. Completion of this form is N</li> </ol>			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)  e data will appear on the patent. If an assignee is identified below, the document has been filed for DT a substitute for filing an assignment.			
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):						
riease check the appropria	ate assignee category or	categories (will not be pr	inted on the patent):	Individual 🖵 Co	rporation or other private gro	oup entity  Government
4a. The following fee(s) are submitted:    X   Issue Fee   Record   Issue Fee   X   Publication Fee (No small entity discount permitted)   Advance Order - # of Copies   Record   Issue Fee   Record   Issue Fee   Record   Issue Fee   Is			<ul> <li>b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-0384 (enclose an extra copy of this form).</li> </ul>			
	SMALL ENTITY statu	s. See 37 CFR 1.27.	□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).			
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